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UNITED STATES PATENT AND TRADEMARK OFFICE  
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Bib Data Sheet

CONFIRMATION NO. 4391

<b>SERIAL NUMBER</b> 09/760,810	<b>FILING DATE</b> 01/17/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 003300-737
<b>APPLICANTS</b> Kjell Olmarker, Molndal, SWEDEN; Bjorn Rydevik, Goteborg, SWEDEN;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF PCT/SE99/01671 09/23/1999				
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 9803276-6 09/25/1998 SWEDEN 9803710-4 10/29/1998				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 02/27/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 2
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> Benton S. Duffett, Jr. BURNS, DOANE, SWECKER, & MATHIS, L.L.P. P.O. Box 1404 Alexandria, VA 22313-1404				
<b>TITLE</b> Use of certain drugs for treating root injury				
<b>FILING FEE RECEIVED</b> 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



Bib Data Sheet

CONFIRMATION NO. 4391

SERIAL NUMBER 05760,810	FILING DATE 01/17/2001  RULE	CLASS 514	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. 003300-737
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## APPLICANTS

Kjell Olmarker, Molndal, SWEDEN;

Bjorn Rydevik, Goteborg, SWEDEN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of PCT/SE99/01671 09/23/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

SWEDEN 9803276-6 09/25/1998

SWEDEN 9803710-4 10/29/1998

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/27/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR  COUNTRY SWEDEN	SHEETS  DRAWING 0	TOTAL  CLAIMS 2	INDEPENDENT  CLAIMS 2
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## ADDRESS

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P.O. Box 1404  
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22313-1404

## TITLE

USE OF CERTAIN METALLOPROTEINASE INHIBITORS FOR TREATING NERVE DISORDERS MEDIATED BY NUCLEUS PULPSUS

FILING FEE  RECEIVED 972	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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